

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3		1				
4	1					
5		1				
6		1				
7		1				
8	1					
9	<del>1</del>	<del>1</del>				
10	<del>1</del>	<del>1</del>				
11		1				
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TOTAL IND.	4	↓		↓		↓
TOTAL DEP.	7	←		←		←
TOTAL CLAIMS	11					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS